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CONFIRMATION NO. 7747

SERIAL NUMBER 09/933,915	FILING OR 371(c) DATE 08/20/2001 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 07917-120001 / UMMc-34 Tr
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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/226,197 08/18/2000

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 09/10/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 14	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

TRANCE regulation of chondrocyte differentiation

FILING FEE RECEIVED 621	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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